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Bib Data Sheet

CONFIRMATION NO. 1365

<b>SERIAL NUMBER</b> 10/545,191	<b>FILING OR 371(c) DATE</b> 08/10/2005 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> KCX-1261-PCT-US (64357872)
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/EP04/01139 02/07/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

GERMANY 103 05 553.3 02/10/2003

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 05/06/2006**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 28	<b>INDEPENDENT CLAIMS</b> 1
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

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**TITLE**

DEVICE FOR TAMPONADE OF BODY CAVITIES AND MECHANICAL ANCHORING OF A CATHETER

<b>FILING FEE RECEIVED</b> 950	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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